

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	70385	
O.I.P.E. CLASSIFIER		5	4-6-66
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	59227		5/25/00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	7-11-02
2	10-25-02
3	5-4-03
4	6-11-03
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50	6-11-03

Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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